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Country programme recommendation**

Chad

Addendum

Summary

This addendum to the country note submitted to the Executive Board at its first regular session of 2000 contains the final country programme recommendation for approval by the Board.

The Executive Director *recommends* that the Executive Board approve an amount of US$ 12,204,000 from general resources, subject to the availability of funds, and an amount of US$ 13,950,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the Chad country programme for the period 2001-2005.

* E/ICEF/2000/14.

** The original country note provided only indicative figures for the estimated programme cooperation. The figures indicated in this addendum are final and reflect the unspent balances of programme cooperation at the end of 1999. These figures are contained in the summary of recommended commitments for programmes to be financed from general resources and supplementary funding (E/ICEF/2000/P/L.27).

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Situation of children and women

1. Owing to the nation's large size (1,284,000 square kilometres) in relation to its population (7.5 million), the cooperation programme has concentrated most of its field-level activities in the priority intervention areas. These areas were selected because they had the highest child mortality rates in the country. The situation of women and children in Chad remains almost identical to that described in the country note (E/ICEF/2000/P/L.5); however, the following new factors should be considered.

2. At the economic level, the plan to exploit the nation's petroleum resources in the near future and government decisions on resource allocation, if implemented, may lead to a significant increase in national resources allocated to the basic social sectors.

3. The situation in northern Chad is unstable because of an armed rebellion; if it worsens, it may compromise the reconstruction effort, have a serious effect on the lives of Chadian children and women and deter the activities of the nation's development partners. Furthermore, Chad is subject to cyclic measles, cholera and meningitis epidemics and food shortages. Since December 1999, a meningitis epidemic, which also affects neighbouring countries, has been the target of concerted action by the international community that has resulted in the vaccination of over a million people and treatment of the majority of cases; the United Nations Children's Fund (UNICEF) has provided vaccinations and funding for the organization of field-level activities.

Programme cooperation, 1996-2000

4. The mid-term review revealed the significant results achieved by the programme, as described in the country note. The programme of cooperation 1996-2000 was implemented in nine of the nation's 14 prefectures targeting 10 subprefectures and 5 urban communes; these are heavily populated areas with few services. Despite all efforts, the programme's objectives have been only partially achieved; nevertheless, the following results have been observed.

5. Through the provision of technical assistance and with funding from the World Bank, the health and nutrition programme helped to strengthen the national health policy and to solve the major health problems affecting children and women by implementing the Bamako Initiative in the priority intervention areas. Three years after its implementation, the Initiative's effectiveness has been demonstrated; the vaccination rate has risen from 20 per cent in 1996 to 50 per cent in 1999, as compared to 30 per cent for the nation as a whole. Access to health care has risen from 70 per cent to 80 per cent in the region, and the quality and rate of use of health services have increased. The programme has helped to reintroduce, on a wider scale, nutrition programmes aimed at combating micronutrient deficiencies and monitoring growth. It has also been involved in programmes to eradicate poliomyelitis with UNICEF support for vaccines; in the organization of grass-roots activities; and in the provision of logistical support in close partnership with the World Health Organization (WHO), Rotary International, the United States Agency for International Development (USAID) and the Centres for Disease Control and Prevention (CDC).

6. The education programme is currently a model for promotion of the state non-traditional education policy because of its capacity to adapt strategically to local situations, lower the cost of education for families and lighten the burden of housework for girls. There has been a clear improvement in enrolment indicators in the priority intervention areas. In particular, the gross school attendance rate rose from 70 per cent in 1996-1997 (53 per cent for girls) to 78 per cent (61 per cent for girls) in the programme area as compared to 65 per cent (46 per cent for girls) at the national level. The programme provided support for the preparation of pedagogical materials and the training of 300 teachers; 33 pilot preschools have been opened with an enrolment of over 750 children to date. In addition, educational equipment and materials have been provided to 460 literacy centres and 12,000 girls.

7. The water, sanitation and environment programme has been implemented in cooperation with WHO, bilateral donors and non-governmental organizations. Thanks to UNICEF support, a 13 per cent increase in the supply of drinking water was achieved in the areas covered by the programme through the creation of 109 modern water points and the redrilling of 130 wells. The use of local groups and non-governmental organizations and of appropriate technology has resulted in considerable savings; for example, the linear unit cost of hand drilling was

reduced from CFA francs 120,000 to CFA francs 20,000. The dracunculiasis (guinea worm) eradication programme is at the certification stage, and the number of cases has fallen from 1,231 in 1994 to 3 in 1998 and 0 in 1999.

8. The urban development and children in need of special protection programme has achieved three major goals: it has (a) publicized the problem of poor women and working children by organizing seminars and training teachers; (b) restructured the legal system and adapted it to the needs of children by establishing 14 children's courts within the trial court system and a Children's Parliament; and (c) provided technical assistance to the national technical committee responsible for preparing Chad's initial report on the implementation of the Convention on the Rights of the Child. The programme has also achieved the social rehabilitation of 1,200 children by giving them better access to basic services and reuniting them with their families.

9. The primary achievements of the social mobilization programme include support for development of the social mobilization strategy and the national policy of communication for development; reduction by up to 70 per cent of the cost of message preparation and dissemination; creation of a network of related associations; and community-centred social mobilization.

10. The research, monitoring and evaluation programme has developed and implemented the planning, coordination and management framework for the strategy to decentralize the programme of cooperation. It has provided training in planning, monitoring and evaluation to 74 technicians in central and peripheral posts. It has also established and equipped 6 State-run sectoral coordination offices and 10 multisectoral technical teams responsible for programme planning, implementation and monitoring in the subprefectures of the programme of cooperation's priority intervention area and for promoting local community development training. The principal partners are following with interest the results achieved by these teams, and the Ministry of Planning intends to expand this approach to other areas once it has been evaluated.

Lessons learned from previous cooperation

11. The overall lesson learned is that the use of multisectoral and integrated approaches in close cooperation with other sectoral partners has achieved significant results. This is particularly true in the case of the education of girls, establishment of new decentralized programme planning and management systems and eradication of dracunculiasis. The original framework operational plan was adapted during the mid-term review by limiting the intervention area and revising the objectives. The review also revealed delays resulting from problems in implementing the national policy of decentralization.

Recommended programme cooperation, 2001-2005

General resources: US$ 12,204,000

Supplementary funding: US$ 13,950,000

Recommended programme cooperation, 2001-2005[a]

(In thousands of United States dollars)

	General	*Supplementary funding*	*Total*
Health and nutrition	2 270	4 400	6 670
Basic education and child development	2 810	3 100	5 910
Water, sanitation and hygiene	1 470	2 600	4 070
Advocacy and social mobilization	1 740	850	2 590
Decentralization and monitoring of vulnerable groups	2 520	2 600	5 120
Cross-cutting costs	1 394	400	1 794
Total	**12 204**	**13 950**	**26 154**

[a] The breakdown of estimated annual expenditures is in table 3.

Process of preparation of the country programme

12. The formulation of the new programme was coordinated by the Ministry of Planning in conjunction with the other ministries, the United Nations agencies and donors. It was guided by: (a) the UNICEF medium-term plan and priorities for children; (b) the policy of reducing the gap between the needs of the poorest families and the supply of services; and (c) the search for increasing complementarity with the other donors and United Nations agencies, especially within the framework of reform of the United Nations system (completion of the common country assessment, harmonization of programming cycles and formulation of the United Nations Development Assistance Framework (UNDAF)). At the June 1999 strategy meetings and the February 2000 preliminary review of the new programme, it was recommended that the programme of cooperation 2001-2005 should endeavour to increase its impact in order to ensure widespread respect for the rights of women and children.

Purpose and objectives of the country programme

13. The purpose of the country programme is to improve the living conditions of children and women by working to ensure the recognition and exercise of their rights. It will also help to achieve the national goals for the survival, protection, development and participation of children as established by the Government in its poverty reduction policy and its Outline National Plan 1998-2005. The objectives of the programme are to help to (a) reduce the infant mortality rate from 103 to 82 per 1,000 live births; (b) reduce the infant and child mortality rate from 194 to 145 per 1,000 live births; (c) reduce the maternal mortality rate from 827 to 662 per 100,000 live births; (d) give 80,000 children, adolescents and women access to high-quality basic education; and (e) promote implementation of and compliance with the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women.

Links to national and international priorities

14. The priorities and objectives established under this programme are directly related to the main problems identified during the 1999 analysis of the situation of children, which revealed that the primary obstacles to meeting the needs of children and women were linked to major problems in ensuring the survival, protection and development of the nation's people; various solutions to these problems will be provided by the sectoral and cross-cutting programmes.

15. The national priorities established in the fourth round-table conference of donors to the Republic of Chad and the Outline National Plan 1998-2000 reaffirm the overall objective of combating poverty and improving the living conditions of the people of Chad. The five national strategies include: (a) promotion of human development, giving priority to elementary education, literacy training, primary health care, food security and social welfare; and (b) protection of vulnerable groups, targeting in particular children and women in need of special protection. These strategies were taken into consideration to a great extent in the preparation of this new programme.

16. The priorities set by UNICEF, particularly for the period 1998-2000, have been incorporated into the implementation of the current programme, especially in the areas of vaccination and efforts to combat vitamin A deficiency, eradicate poliomyelitis, reduce the incidence of measles and eliminate neonatal tetanus. These issues have also been included in the 2001-2005 programme through project continuity and the completion of ongoing activities. With respect to the UNICEF priorities for children, the three main areas — the full, harmonious development of children; basic education for all, focusing on education of girls; and assistance to adolescents — have been reflected in the various projects developed.

Programme strategy

17. The primary strategies are those described in the country note. However, pursuant to the ongoing discussions with the nation's partners and in view of the multisectoral approach to the programme embodied in the country note, an integrated approach to early childhood training will be developed through cooperation between all programmes under the aegis of the education programme. Young people's active participation in project development, implementation and monitoring will also be strengthened.

18. The priority intervention area is that of the country programme 1996-2000; however, efforts will be made to target the largest villages in these subprefectures and to provide direct coverage to nearly 80 per cent of the resident population, as compared with 30 per cent under the previous programme (which covered only the capitals). Thus, the country programme will target nearly 2.3 million people in 2001, including 414,000 children under five and 506,000 women aged 15 to 45.

19. The country programme 2001-2005 will include three sectoral programmes (health and nutrition; basic education and child development; water, sanitation and hygiene); two cross-cutting programmes (advocacy and social mobilization; and decentralization and monitoring of vulnerable groups); and a sixth programme entitled "cross-cutting costs". For all programmes, general resources will be used to support primary project activities and essential technical cooperation for the general operations of the country programme. Supplementary funding will be used for complementary activities and, in particular, those included in the area of overlap with the programme of cooperation.

20. The health and nutrition programme includes two projects: support for national programmes and revitalization of the health services at the district level. The primary partners are United Nations agencies such as WHO, the United Nations Population Fund (UNFPA) and the World Food Programme (WFP); the World Bank; the African Development Bank (ADB); and various non-governmental organizations.

21. The objectives of the project to support national programmes include higher rates of vaccination (60 per cent for the diphtheria/pertussis/tetanus (DPT) vaccine for children under one year), adequate supplementation (two doses per year) in vitamin A (80 per cent of children under five); exclusive breastfeeding for children under six months (40 per cent of mothers); consumption of iodized salt (90 per cent of households); correct use of oral rehydration therapy (50 per cent of households); use of impregnated mosquito nets (20 per cent of households); establishment of maternal health as a national priority; and promotion of improved education on the

prevalence of human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) and development of integrated approaches in cooperation with the national programme and the Joint United Nations Programme on Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (UNAIDS) in order to increase the rate of use of effective preventive methods. Activities will include provision of materials and equipment; supply of vaccines and essential drugs; training/retraining of government and non-governmental organization staff, and social mobilization.

22. The objectives of the project to revitalize health services at the district level within the framework of the Bamako Initiative include improved availability of and access to quality care in health centres and district hospitals in partnership and cooperative management with local communities. UNICEF technical and financial cooperation will complement the financial and logistical support provided by the World Bank. The African Development Bank (ADB) and bilateral cooperation with France will also be involved in the construction and rehabilitation of the health-care infrastructure. Studies will be carried out in order to better evaluate the revitalization process with a view to expanding it to the country as a whole. Lessons learned in the area of intersectoral cooperation will be used to benefit the development of the integrated child welfare programme.

23. The basic education and child development programme will be concentrated in the priority intervention area. It will include three projects: formal and non-informal basic education with a focus on improved quality of services; early childhood and parental education; and special protection. The primary partners are the World Bank, ADB, Islamic Development Bank, relevant non-governmental organizations and the recipient communities.

24. The goals of the formal and informal basic education project include an increase in the gross school attendance rate for girls (from 65 per cent to 80 per cent) with a significant reduction of the existing gap between boys and girls; reduction of the repeat and drop-out rates for girls aged 6 to 12 (from 26 per cent to 20 per cent and from 10 per cent to 5 per cent, respectively); action to promote completion of primary education by 75 per cent of girls enrolled in schools supported by the project; and functional literacy for 50,000 women (aged 15 to 45) and 10,000 unenrolled young people (aged 8 to 14). The project will provide educational materials and equipment, especially for girls, and will support methodology and curriculum adaptation in the formal and non-formal basic educational systems.

25. The goals of the early childhood and parental education project include development of a community-based non-formal training system with an integrated approach for 40,000 children aged three to five; development and implementation of a parental education programme for 40,000 households; and support for preparation and implementation of a national early childhood training policy. This project will strengthen the institutional, technical and operational capacities for early childhood training and parental education by training management personnel and providing educational and recreational materials and equipment.

26. The objectives of the special protection project include legal protection for children in need of special protection, especially those subjected to the worst forms of child labour; and family reunification and economic rehabilitation for children in need of special protection and for women living in poverty. The project will involve advocacy for improvement of the legislative framework and will support government ministries and community institutions by assisting children through the provision of training, equipment and materials. Women will receive financing and training in order to develop income-generating activities with supplemental funding from other partners.

27. The water sanitation and hygiene programme will focus on the primary intervention area and will include two projects: water supply and hygiene/sanitation. The primary partners are the United Nations Development Programme (UNDP), the World Bank (development of a water-use plan), WHO (hygiene education and eradication of dracunculiasis) and the UNICEF national committees of Belgium, Finland, France, the Netherlands and Spain (funding for water points). It will also promote local enterprises and associations at field level.

28. The objectives of the drinking water project include access to high-quality bottled water for 250,000 people; access to high-quality bottled water for 30,000 people in the outskirts of N'Djamena and the other four largest cities; and certified eradication of

dracunculiasis. The project will strengthen the intervention capacities of community project management and maintenance bodies. Integrated, community-based dracunculiasis monitoring in at-risk areas will be maintained and strengthened.

29. The objectives of the hygiene and sanitation project include increased access to latrines in the region (from 7 per cent to 20 per cent); assistance with household waste management in the region; and promotion of hygiene education. The project will support the promotion and dissemination of alternative technologies, strengthening of local capacities and promotion of latrines in schools, health centres and homes.

30. The advocacy and social mobilization programme will cooperate with other agencies of the United Nations system and in partnership with relevant non-governmental organizations, public and private media and village committees.

31. The objectives of the project to advocate implementation of the Conventions will include harmonization and implementation of national legislation concerning the rights of children and women; support for the efforts of 40 partners and allies to promote implementation of the two Conventions; and strengthening of existing community centres for promotion of the rights of children and women. The project will carry out information and awareness campaigns to publicize the two Conventions and, to that end, will develop advocacy tools. It will also provide technical and logistical support for Chad's public and private media. Involvement in the national mine clearance programme, in cooperation with UNDP and Handicap International, will be increased.

32. The objectives of the project to promote communication in support of programmes will include public promotion of desirable behaviour and attitudes in the fields of health, education and sanitation; strengthening of partners' technical capacities for message preparation and dissemination; and access to information and knowledge of their rights and duties for 3,000 women in 1,000 villages and 30 suburbs of the 5 largest cities. With respect to the low coverage of radio and television reception in the nation, the project will focus on the use of "low-tech" media (posters, felt markers and view boxes) and on training in interpersonal communication. Efforts will also be made to ensure young people's participation in the choice of activities.

33. The programme on decentralization and monitoring of vulnerable groups is the engine of the programme of cooperation. It will strengthen national and country office capacities in the area of programme and situation monitoring and evaluation. Its objectives will be achieved in close cooperation with United Nations agencies and various national non-governmental organizations. The programme includes two projects.

34. The objectives of the programme on cooperation and the situation of children and women include capacity-building for national and decentralized bodies in the area of social policy analysis and implementation; improved monitoring of the situation of children and women; and development of a formal framework for cooperation programme management, monitoring and evaluation. The project will put the integrated monitoring and evaluation plan into operation.

35. The objectives of the programme on decentralization and grass-roots empowerment include development and consolidation of decentralized planning in the priority intervention area; promotion of community-level training in 1,000 villages and five municipalities; and support for community projects in 1,000 villages and five municipalities. The project will ensure that local development plans focus on the promotion and enforcement of the rights of children and women.

Monitoring and evaluation

36. Monitoring and evaluation will be an integral part of implementation of the country programme. The primary impact indicators will be the mortality rates (infant, infant and child and maternal); malnutrition rates; proportion of the population consuming iodized salt; gender- and age-disaggregated statistics on the prevalence of HIV/AIDS and the proportion of adults and young people who know at least two ways of protecting themselves against HIV; gender-disaggregated school attendance and literacy rates; proportion of the population with access to drinking water at a reasonable distance; and proportion of children under age 12 and working full time. Through periodic updating of the integrated monitoring and

evaluation plan and organization of Multiple Indicator Cluster Surveys (MICS), progress and the impact of the country programme will be monitored. Indicators at the subprefectural level will be established through decentralized microplans. The programme will involve regular on-site visits, studies and evaluations to gather relevant information and assess programme development and potential improvements. The primary evaluations planned are in the areas of child labour, family-level approaches to child-rearing and the ongoing pilot projects on parenting and the education of girls. The action plans will be reviewed biannually and annually. A mid-term review will be carried out in June 2003.

Cooperation with other partners

37. UNICEF will strengthen its cooperation with other development agencies in Chad and, in particular, with the rest of the United Nations system. Analysis of the situation of women and children has played a central role in the ongoing preparation of a common country assessment; however, at this initial stage of the UNDAF preparation process, it has not had a significant influence on preparation of the new programme. The country office will increase its cooperation in project implementation with the primary non-governmental organizations working in the field. In the sectoral programmes, it will endeavour to promote cooperation with the principal donors, including the World Bank (health/Bamako Initiative), French cooperation (education) and the National Committees for UNICEF (water, sanitation and health) on the basis of experience that has led to an increase in programme efficiency. Lastly, UNICEF is heavily involved in preparation of the sectoral investment programmes coordinated by the World Bank in the health and education sectors. Interim plans have been developed for the period 1999-2001 and full programmes are planned as from 2002.

Programme management

38. At the national level, the programme of cooperation between the Government of Chad and UNICEF will be coordinated by the Ministry of Planning. The sectoral programmes will be headed by national committees staffed by the national Chad/UNICEF office of the sponsoring ministry, which will be responsible for finalizing plans of action, monitoring their implementation and preparing the various programme evaluations. Cross-cutting costs will be used to implement the country programme by covering some support staff costs (operations and monitoring) and operating expenditures. At the level of the subprefectures and targeted municipalities, decentralized services organized into multisectoral technical teams headed by the chief of the subregional office of the Plan will be responsible for coordinating the development of action plans and monitoring their implementation while ensuring the integration of activities with other development partners. In every village and suburb covered, a Village Development Committee will be responsible for organizing the community, preparing a village action plan and mobilizing local participation. At the country office level, the office's capacity for technical assistance will be strengthened, without increasing the current number of staff members, through the development of an integrated budget and programme of cooperation management plan.

TABLE 1. BASIC STATISTICS ON CHILDREN AND WOMEN

Chad	(1998 and earlier years)		UNICEF country classification
Under-five mortality rate	198	(1998)	Very High U5MR
Infant mortality rate	118	(1998)	Very High IMR
GNP per capita $	230	(1998)	Low GNP
Total population	7.3 million	(1998)	

KEY INDICATORS FOR CHILD SURVIVAL AND DEVELOPMENT		1970	1980	1990	1998
Births	(thousands)	178	222	271	318
Infant deaths (under 1)	(thousands)	27	28	32	38
Under-five deaths	(thousands)	45	46	54	63
Under-five mortality rate (per 1,000 live births)		252	208	198	198
Infant mortality rate (under 1) (per 1,000 live births)		149	124	118	118

		About 1980	Most recent
Underweight children (under 5) (% weight for age, 1997)	Moderate & severe	..	39
	Severe	..	16
Babies with low birth weight (%)		..	..
Primary school children reaching grade 5 (%, 1986/1995)		82	59

NUTRITION INDICATORS	About 1980	Most recent
Exclusive breast-feeding rate (<4 mos.) (%, 1997)	..	2
Timely complementary feeding rate (6-9 mos.) (%, 1997)	..	81
Continued breast-feeding rate (20-23 mos.) (%, 1997)	..	62
Prevalence of wasting (0-59 mos.) (%, 1997)	..	14
Prevalence of stunting (0-59 mos.) (%, 1997)	..	40
Vitamin A supplementation coverage (6-59 mons.) (%, 1998)	..	0
Household consuming iodized salt (%, 1997)	..	55

HEALTH INDICATORS		About 1980	Most recent
ORT use rate (%, 1997)		..	29
Routine EPI vaccines financed by government (%, 1998)		..	100
Access to safe water (% of population, 1997)	Total	..	27
	Urban/rural	.. / ..	61 / 24
Access to adequate sanitation (% of population, 1997)	Total	..	27
	Urban/rural	.. / ..	79 / 11
Births attended by trained personnel (%, 1997)		..	15
Maternal mortality rate (per 100,000 live births, 1980-1998)		..	830

Immunization		1981	1985	1990	1998
One-year-old (%) immunized against:	Tuberculosis	..	15	59	43
	DPT	..	3	20	24
	Polio	..	3	20	24
	Measles	..	7	32	30
Pregnant women (%) immunized against:	Tetanus	..	3	62	27

TABLE 1 (continued)

Chad

EDUCATION INDICATORS		About 1980	Most recent
Primary enrolment ratio (gross/net)	Total	63 / ..	65 / 52
(%, 1985/1997*)	Male	63 / ..	83 / 63
	Female	24 / ..	46 / 39
Secondary enrolment ratio (gross/net)	Total	.. / ..	9 / ..
(%, 1996,1996)	Male	.. / ..	15 / ..
	Female	.. / ..	4 / ..
Adult literacy rate, 15 years & older	Total	..	33
(%, 1997*)	Male/female	.. / ..	46 / 22
Radio/television sets (per 1,000 population, 1985/1996)		229 / ..	249 / 1

DEMOGRAPHIC INDICATORS		1970	1980	1990	1998	2000
Total population	(thousands)	3652	4477	5746	7270	7651
Population aged 0-18 years	(thousands)	1732	2154	2951	3805	4005
Population aged 0-5 years	(thousands)	615	754	1083	1316	1362
Urban population (% of total)		12.0	19.9	21.0	23.3	24.0
Life expectancy at birth	Total	38	42	45	47	48
(years)	Male	37	40	44	46	47
	Female	40	43	47	49	50
Total fertility rate		6.5	6.6	6.6	6.0	5.8
Crude birth rate (per 1,000 population)		49	49	47	44	43
Crude death rate (per 1,000 population)		26	23	20	18	17

		About 1980	Most recent
Contraceptive prevalence rate		1	4
(%, 1977/1997)			
Population annual growth rate	Total	2.3	2.9
(%, 1970-1990/1990-1998)	Urban	5.1	3.7

ECONOMIC INDICATORS		About 1980	Most recent
GDP per capita annual growth rate		-1.9	1.1
(%,1965-1980/1990-1998)			
Inflation rate (%,1965-1980/1990-1998)		6	8
Population below $1 a day (%)		..	..
Household income share	Top 20%/bottom 40%	.. / ..	.. / ..
(%)			
Government expenditure	Health/education	.. / ..	9 / 9
(% of total expenditure, 1988)	Defense		..
Household expenditure	Health/education	.. / ..	.. / ..
(% share of total, 1980 or 1985)			
Official development assistance	$US millions	60	247
(1981/1997)	As % of GNP	11	10
Debt service			
(% of goods and services exports, 1982/1997)		2	9

* UNA 2000 database.

TABLE 2. EXPENDITURE UNDER PREVIOUS COOPERATION PERIOD, 1996-2000 a/

COUNTRY CHAD
LATEST BOARD APPROVAL 1995
GENERAL RESOURCES $8,500,000

(In thousands of United States dollars)

Programme sectors/areas	Supplies and equipment (actual)		Training grants (actual)		Project staff (actual)		Other cash (actual)		TOTAL					
									Regular resources b/		Other resources		Total (RR & OR)	
	RR b/	OR	RR b/	OR	RR b/	OR	RR b/	OR	Actual	Planned	Actual	Planned	Actual	Planned
Health and nutrition	497	2,461	98	433	546	852	228	1,757	1,369	2,085	5,503	8,230	6,872	10,315
Water supply, sanitation and environment	188	330	46	56	184	346	156	431	574	650	1,163	2,420	1,737	3,070
Education	79	784	180	352	301	30	146	375	706	1,835	1,541	3,500	2,247	5,335
Community organization and development	161		171	5	120		214		666	150	5	1,000	671	1,150
Social mobilization and advocacy	187		141		58		296		682	1,168		500	682	1,668
Planning and social statistics	172		122		497		407		1,198	560		375	1,198	935
Programme support	194	5			723	267	180	37	1,097	2,052	309		1,406	2,052
Emergency		419						57			476		476	
GRAND TOTAL	1,478	3,999	758	846	2,429	1,495	1,627	2,657	6,292	8,500	8,997	16,025	15,289	24,525

RR = Regular resources
OR = Other resources
a/ Actual expenditure includes expenditure recorded as of 31 May 2000
b/ Actual GR expenditure includes allocations from global funds

TABLE 3

PLANNED YEARLY EXPENDITURES

COUNTRY: CHAD
PROGRAMME CYCLE : 2001-2005

	FUND	2001	2002	2003	2004	2005	TOTAL
Health and nutrition	RR	400,000	410,000	440,000	510,000	510,000	2,270,000
	FOR						
	NOR	700,000	800,000	900,000	1,000,000	1,000,000	4,400,000
	TOTAL	1,100,000	1,210,000	1,340,000	1,510,000	1,510,000	6,670,000
Basic education and child development	RR	500,000	510,000	540,000	630,000	630,000	2,810,000
	FOR						
	NOR	500,000	600,000	600,000	700,000	700,000	3,100,000
	TOTAL	1,000,000	1,110,000	1,140,000	1,330,000	1,330,000	5,910,000
Water, sanitation and hygiene	RR	260,000	270,000	290,000	330,000	320,000	1,470,000
	FOR						
	NOR	400,000	500,000	500,000	600,000	600,000	2,600,000
	TOTAL	660,000	770,000	790,000	930,000	920,000	4,070,000
Advocacy and social mobilization	RR	320,000	330,000	340,000	380,000	370,000	1,740,000
	FOR						
	NOR	100,000	150,000	200,000	200,000	200,000	850,000
	TOTAL	420,000	480,000	540,000	580,000	570,000	2,590,000
Decentralization and monitoring of vulnerable groups	RR	460,000	470,000	490,000	550,000	550,000	2,520,000
	FOR						
	NOR	400,000	500,000	500,000	600,000	600,000	2,600,000
	TOTAL	860,000	970,000	990,000	1,150,000	1,150,000	5,120,000
Cross-cutting costs	RR	234,000	252,000	274,000	307,000	327,000	1,394,000
	FOR						
	NOR	80,000	80,000	80,000	80,000	80,000	400,000
	TOTAL	314,000	332,000	354,000	387,000	407,000	1,794,000
TOTAL, PROGRAMME BUDGET	RR	2,174,000	2,242,000	2,374,000	2,707,000	2,707,000	12,204,000
	FOR						
	NOR	2,180,000	2,630,000	2,780,000	3,180,000	3,180,000	13,950,000
	TOTAL	4,354,000	4,872,000	5,154,000	5,887,000	5,887,000	26,154,000
STAFF COSTS a/		679,374	720,097	754,610	792,847	828,863	3,775,791
GENERAL OPERATING COSTS		519,995	489,330	509,900	493,250	539,450	2,551,925
TOTAL, ESTIMATE SUPPORT BUDGET		1,199,369	1,209,427	1,264,510	1,286,097	1,368,313	6,327,716
GRAND TOTAL		5,553,369	6,081,427	6,418,510	7,173,097	7,255,313	32,481,716

RR = regular resources
FOR = funded other resources
NOR = new other resources

a/ Including consultants and temporary assistance

TABLE 4

COUNTRY : CHAD
PROGRAM : 2001-2005

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET				POSTS a/										STAFF COSTS b
	RR	FOR	NOR	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP
REGULAR RESOURCES :															
Health and nutrition	2,270,000			2,270,000	0	0	0	1	0	0	1	0	0	1	925,055
Basic education and child development	2,810,000			2,810,000	0	0	0	1	0	0	1	0	0	1	925,055
Water, sanitation and hygiene	1,470,000			1,470,000	0	0	0	0	0	0	0	0	0	0	0
Advocacy and social mobilization	1,740,000			1,740,000	0	0	0	0	0	0	0	0	0	0	553,380
Decentralization and monitoring of vulnerable groups	2,520,000			2,520,000	0	0	0	0	1	0	1	0	0	1	819,845
Cross-cutting costs	1,394,000			1,394,000	0	0	0	0	0	0	0	2	12	14	0
TOTAL RR	12,204,000			12,204,000	0	0	0	2	1	0	3	2	12	17	3,223,335
OTHER RESOURCES :															
Health and nutrition		0	4,400,000	4,400,000	0	0	0	0	0	0	0	3	3	6	0
Basic education and child development		0	3,100,000	3,100,000	0	0	0	0	0	0	0	1	1	2	0
Water, sanitation and hygiene		0	2,600,000	2,600,000	0	0	0	1	0	0	1	0	1	2	925,055
Advocacy and social mobilization		0	850,000	850,000	0	0	0	0	0	0	0	2	0	2	0
Decentralization and monitoring of vulnerable groups		0	2,600,000	2,600,000	0	0	0	0	0	0	0	0	0	0	0
Cross-cutting costs		0	400,000	400,000	0	0	0	0	0	0	0	0	0	0	0
TOTAL OR		0	13,950,000	13,950,000	0	0	0	1	0	0	1	6	5	12	925,055
TOTAL RR & OR	12,204,000	0	13,950,000	26,154,000	0	0	0	3	1	0	4	8	17	29	4,148,390
SUPPORT BUDGET			Operating costs	2,551,925											
			Staffing		0	0	1	1	1	0	3	3	8	14	2,930,993
GRAND TOTAL (RR + OR + SB)					0	0	1	4	2	0	7	11	25	43	7,079,383
Number of posts and staff costs:															
Current programme cycle											6	12	26	44	
At the end of proposed programme cycle (indicative only)											7	11	25	43	7,079,383

RR = regular resources.
OR = other resources.
FOR = funded other resources.
NOR = new other resources.
IP = international Professional.
NP = national Professional.
GS = General Service.
SB = support budget.

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Excludes temporary assistance and overtime.